## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000018091 (3)

PALM GARDENS DEVELOPMENT, INC.

## **FILED** Apr 15 1998 8:00am Secretary of State



Principal Place of Business Mailing Address		T (\$D) \$\$01 (ID (D) ) COD)  CD  31 OD  4 OD  4 OD  6 O	001 10114 00110 10161 1101 1801	
120 W GLADES ROAD 120 W GLADES ROAD				
BOCA RATON FL 33432	BOCA RATON FL 33432		DO NOT WRITE IN THE	S SPACE
			3. Date Incorporated or Qualified	
			02/26/1997	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26		65. 6755 79J	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State		6. Election Campaign Financing	<del></del>
23	28		Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	Zip	Country	8. This corporation owes or has paid the c	
24 25		30	Personal Property Tax due June 30.	Yes No
9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name				
POPKIN & SHURPIN, P.A.		81 Name	Name	
2499 GLADES ROAD		82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
SUITE 114 BOCA RATON FL 33431		83		
BOCA RATON PL 33431				
		84 City	F	85 Zip Code
11. Pursuant to the provisions of Sections 607.	0502 and 607.1508, Florida Statute	s, the above-named corp	oration submits this statement for the purpose	of changing its registered
office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607,0505. Florida Statutes.				
SIGNATURE				
Signature, typed or printed name of registered		Registered Agent signature require	•	
the state of the s	AND DIRECTORS  DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AN	
NAME HOWELL, MICHAEL J	DELETE	1.1 TIFLE		☐ Change ☐ Addition
NAME HOWELL, MICHAEL J STREET ADDRESS 120 W GLADES ROAD		1.2 NAME		
CITY-ST-ZIP BOCA RATON FL 33432		1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		
TITLE	DELETE	2.1 TITLE		Change Addition
NAME	_	2.2 NAME		
STREET ADDRESS		2.3 STREET ADDRESS		
City-St-ZiP		2. 4 CITY - ST - ZIP		
TITLE	☐ DELE <b>TE</b>	3.1 TITLE		Change Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4. CITY-ST-ZIP		
TITLE	☐ DELETE	4.1 TITLE		Change Addition
NAME OTHER ADDRESS		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE	DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS	•	1
CITY-SI-ZIP		6.4 CITY - ST - ZIP		

y for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information accurate and that my signature shall have the same legal effect as if made under oath; that I am an to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in indicated on this annual report or supplemental annual rep officer or director of the corporation or the receiver or trus Block 12 or Block 13 if changed, or on an attachment